Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

1731037

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(Column 1)		(Colu	(Column 2)		TYPE [		OR			
TOTAL CLAIMS			20		ļ		-	RATE	FEE	4	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20= *			<del>,</del>		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2 minus 3 = * 0					X43=		OR	X86=		
ML	LTIPLE DEPEN	NDENT CLAIM P	RESENT				0	+145=		OR	+290=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II							OTHER THAN						
		(Column 1)	(Column 2)			(Column 3)	1 -	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
4ME	Independent	*	Minus	***		]=	[ [	X43=		OR	X86=		
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		1	+145=		OR	+290=		
							L	TOTAL			TOTAL		
								ADDIT. FEE		OR	ADDIT. FEE		
		(Column 1)		(Colun		(Column 3)	1 r		4001	1	· · · · · · · · · · · · · · · · · · ·	4551	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	_	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	<u> </u>	=		X43=		OR	X86=		
	FIRST PRESE	NIATION OF MU	LTIPLE DEPENDENT (		CLAIM	CLAIM		+145=		OR	+290=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		
		mber Previously Paid ther Previously Paid					er four	nd in the app	ropriate box	in col	umn 1.		